

# CLAIMS ONLY BEST AVAILABLE COPY

Application Number

10/289,285

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED 5/11/05		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3	<del>1</del>	<del>1</del>				
4		1				
5		1				
6	1					
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Total Indep	3					
Total Depend	11					
Total Claims	14					

  

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						